

Jeffrey Reames, MD  
6/1/2021

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1                   IN THE UNITED STATES DISTRICT COURT  
2                   FOR THE WESTERN DISTRICT OF OKLAHOMA  
3  
4       (1) PATRICIA THOMPSON, as       )  
5       Personal Representative of the)       Estate of MARCONIA LYNN       )  
6       KESSEE,                               )  
7                   Plaintiff,                               )  
8       - vs -                               )       No. CIV-19-113-SLP  
9       (1) NORMAN REGIONAL HOSPITAL       )  
10      AUTHORITY d/b/a NORMAN               )  
11      REGIONAL HOSPITAL, a public        )  
12      trust, et al.,                        )  
13                   Defendants.                               )

13                               \* \* \* \* \*  
14       VIDEOCONFERENCE DEPOSITION OF JEFFREY REAMES, M.D.  
15                   TAKEN ON BEHALF OF THE PLAINTIFF  
16                   IN OKLAHOMA CITY, OKLAHOMA  
17                   ON JUNE 1, 2021  
18                   COMMENCING AT 8:59 A.M.

19                               \* \* \* \* \*

20  
21  
22                   INSTASCRIP, L.L.C.  
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1 City of Norman and Keith Humphreys, and I have Keaton  
2 Mayfield from our office.

3 THE MONITOR: Will the court reporter please  
4 swear in the witness?

5 JEFFREY REAMES, M.D.,  
6 having been first duly sworn, deposes and says in reply  
7 to the questions propounded as follows:

8 \* \* \* \* \*

9 EXAMINATION

10 BY MR. HAMMONS:

11 Q Dr. Reames, I do not have a copy of your  
12 report for you. Do you need a copy of your report?

13 A I think I can remember most of it --

14 Q Okay.

15 A -- off the top of my head.

16 Q Well, if we get to a point -- I have mine, it  
17 just has my notes on it and it's pretty much the only  
18 piece of paper I have, so I will -- if you need it,  
19 we'll stop and I bet we can fish one out somehow.

20 A Thank you.

21 Q Okay?

22 MS. GOOCH: I've got one if he needs it.

23 MR. HAMMONS: Okay. Because I'm going to be  
24 referring to it a lot, just because I don't have my  
25 outlines, as we spoke about earlier, so I'm going to be

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1 Q Okay. You don't think Mr. Kessee had a drug  
2 overdose?

3 A No, I think -- I think it's very likely he  
4 passed away because of his toxicities to those  
5 medicines, but I don't think he was having any -- any  
6 clinical signs or symptoms outside of someone who is  
7 normally under the influence of alcohol or illegal  
8 substances, that the jail staff or the officers could  
9 have recognized that that was a drug toxicity issue, as  
10 opposed to just being under the influence of alcohol or  
11 illegal substances or having behavioral -- behavioral  
12 issues.

13 Q But we can agree, based on their testimony,  
14 there was no human being at the Cleveland County  
15 Detention Center that's been deposed in this case that  
16 knew the signs and symptoms of drug overdose or drug  
17 withdrawal?

18 MR. YOUNG: Object to the form.

19 A I think there were people at the jail who  
20 could not, and -- and rightly so, maybe don't understand  
21 various drug toxicities.

22 Q (By Mr. Hammons) Well, they don't know how to  
23 determine if somebody is having a drug overdose,  
24 correct?

25 A I think they know --

1 don't -- I don't think I could recall someone returning  
2 after I'd issued a fit slip, back on the same shift that  
3 I was on duty.

4 Q Did you ever experience where you treated a  
5 patient, they left, and then, I don't know, later on,  
6 the officer returned and said, "Can you give me a fit  
7 slip at this point?" Like, returned 45 minutes later  
8 and said, "Can you write me a fit slip for that guy you  
9 saw 45 minutes ago?"

10 A Well, yeah, I -- I can think of some times  
11 that happened, and that's because I probably got busy  
12 and forgot to do one and it kind of fell through the  
13 cracks and then they -- they came back and -- and got  
14 one. It doesn't happen a lot, but I -- I can -- I can  
15 think of some instances where, probably more from just  
16 me forgetting to do it, they -- they will come back and  
17 want one from me.

18 Q Okay. Is it your opinion that when -- well,  
19 I'll put it this way: Is it your opinion that Marconia  
20 Kessee was not saveable at any point on January 16th,  
21 2018?

22 A It -- it is my opinion that whenever these  
23 medicines started to exhibit their toxic effects, it is  
24 more likely than not the die was cast and it would have  
25 been hard to resuscitate him from likely a malignant

1     dysrhythmia even in an ambulance or in an ED setting or  
2     in an ICU, so -- so, yes, I -- I -- I think that the die  
3     was cast once we started to -- to see these effects of  
4     these medicines.

5           Q     When was that? When would -- when did you  
6     start seeing effects of this medicine?

7           A     Well, I think, you know, ultimately, it's when  
8     it's -- it led to his -- this probably malignant  
9     dysrhythmia that he died from in -- in the jail cell. I  
10    think that -- that's, ultimately, when those medicines  
11    kind of had their peak effect. I think, in retrospect,  
12    looking at maybe some of the symptoms he was having,  
13    could have been some of the early effects of the  
14    toxicity of those medicines with some -- some of his  
15    neurological symptoms.

16                   But, again, I'm just -- I'm saying more likely  
17    than not, he -- even then, the -- the die was cast,  
18    that -- wouldn't have been able to save him, clinically,  
19    if he was in an ICU or ER.

20           Q     Okay. Now, in some of your additional general  
21    opinions, your first bullet point seems to be making an  
22    opinion as to the -- well, I don't know what -- I guess  
23    Mr. Kessie's efforts to get drugs, his -- it seems to be  
24    an opinion on his behavior? Is that what Bullet Point 1  
25    is?

1 to suggest to you that Mr. -- or that Officers Canaan  
2 and/or Brown, but particularly Canaan -- 30 minutes  
3 passed from the time they interact with him and the  
4 discharge. And maybe that's not what he stated or  
5 suggested, but I just want to be clear.

6 You've watched the body cam footage?

7 A Yes, I have.

8 Q Are -- are you aware that it shows 15 minutes  
9 passed from the moment Officer Canaan first sees  
10 Mr. Kessee in the emergency room inside the hospital,  
11 until the point in time, outside the hospital, when he  
12 puts his hands on him?

13 A Yes, I'm aware that that's a -- a 15-minute  
14 time interval and not a 30-minute time interval.

15 Q Okay. Those symptoms that we just discussed,  
16 the shaking, slurred speech, diaphoresis or sweating,  
17 breathe -- heavy breathing, unsteady on your feet, are  
18 those also symptoms of intoxication?

19 A Yes.

20 Q I believe you testified with Mr. Hammons,  
21 something to the effect that when the med- --  
22 medications exhibited their toxic effects on Mr. Kessee,  
23 that were unable to be reversed, the die was cast and  
24 that that -- he asked you when that occurred?

25 A Yes.

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1 Q And you said that the dysrhythmia showed  
2 itself at the jail. Do you remember that testimony?

3 A I do.

4 Q You also referenced neurological effects that  
5 indicated the die was cast. Do you remember that --

6 A Yes.

7 Q -- testimony?

8 At what point did those neurological effects  
9 appear or reveal themselves?

10 A I think probably during his -- during his stay  
11 at the Norman Hospital and then into the -- into the --  
12 the parking lot, and then into the detention -- or  
13 the -- the detention -- the jail.

14 Q Okay.

15 MS. GOOCH: I don't have any other questions.

16 MS. DARK: Dr. Reames, I have just a couple of  
17 quick questions.

18 EXAMINATION

19 BY MS. DARK:

20 Q You testified earlier that you reviewed the  
21 jail video, correct?

22 A Correct.

23 Q And you've reviewed the deposition transcripts  
24 of the jailers, correct?

25 A Correct.

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1           A     Potentially, yes.

2           Q     (By Ms. Dark) Would it be difficult for you,  
3     as an emergency room physician, to distinguish between a  
4     patient having symptoms of intoxication versus symptoms  
5     of overdose?

6                     MR. HAMMONS: Object to the form.

7           A     I think that's one of the most important parts  
8     of this case, and as I've tried to articulate earlier,  
9     it would be very difficult, I think, for any emergency  
10    physician to tease out which of these are drug  
11    toxicities and which of these are related to substance  
12    abuse and behavioral health issues. I think it's a  
13    really important point.

14          Q     (By Ms. Dark) And you wouldn't expect someone  
15    without the emergency room training to be able to make  
16    that distinction, correct?

17          A     Be --

18                     MR. HAMMONS: Object to the form.

19          A     Be virtually impossible for them to do that.

20                     MS. DARK: I'll pass the witness.

21                     MR. YOUNG: Hey, I've got -- hey, Chris, I'm  
22    sorry, I've got one, real quick.

23                     MR. HAMMONS: Go for it.

24                     MR. YOUNG: Okay.

25                                     EXAMINATION